

# How to classify the strength of evidence for intervention effectiveness

## Strength of evaluation and research evidence for intervention effectiveness

1. *Strong evidence of effectiveness*  
One systematic review or meta-analysis of comparative studies; or several good quality randomised controlled trials or comparative studies<sup>a</sup>
2. *Sufficient evidence of effectiveness*  
One randomised controlled trial; one comparative study of high quality; or several comparative studies of lower quality<sup>b</sup>
3. *Some evidence of effectiveness*  
Impact evaluation (internal or external) with pre- and post-testing<sup>c</sup>; or indirect, parallel or modelling evidence with sound theoretical rationale and program logic for the intervention.
4. *Weak evidence of effectiveness*  
Impact evaluation conducted but limited by pre- or post-testing only<sup>c</sup>; or only indirect, parallel or modelling evidence of effectiveness.
5. *Inconclusive evidence of effectiveness*  
No position could be reached because existing research/evaluations give conflicting results; or available studies are of poor quality.
6. *No evidence of effectiveness*  
No position could be reached because no evidence of impact/outcome available.
7. *Evidence of ineffectiveness*  
Good evaluations (high quality comparative studies<sup>a</sup>) show no effect or a negative effect.

### **Equivalency with NHMRC Designation of levels of evidence (Table 1):**

<sup>a</sup>Levels I-III, <sup>b</sup>Levels II-III, <sup>c</sup>Level IV

**Table 1. Designation of levels of evidence**

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I	Evidence obtained from a systematic review of all relevant randomised controlled trials
II	Evidence obtained from at least one properly designed randomised controlled trial
III-1	Evidence obtained from well-designed pseudo-randomised controlled trials (alternate allocation or some other method)
III-2	Evidence obtained from comparative studies with concurrent controls and allocation not randomised (cohort studies), case-control studies, or interrupted time series with a control group
III-3	Evidence obtained from comparative studies with historical control, two or more single-arm studies, or interrupted time series without a parallel control group
IV	Evidence obtained from case series, either post-test or pre-test and post-test

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Source: NHMRC 1999 <sup>1</sup>

### References

1. National Health and Medical Research Council. *A guide to the development, implementation and evaluation of clinical practice guidelines*. NHMRC: Canberra 1999.

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